



CREDIT CARD AUTHORIZATION FORM

Please fill out all information below, sign and fax or email back to Frans Koppers Imports Ltd.

Fax (519) 829-1179 or toll free 1-866-418-9192 or

accounting@koppershome.com

Card Holder Information:

Card type (check one) Visa
 Mastercard

Name (as appears on card):

Card Number: _____ - _____ - _____ - _____

Card expiry date: _____ / _____

Card CV Number: _____

Payment details:

Store name: _____

Store Phone number: _____

Authorization:

I, _____ the designated cardholder of the above listed credit card, authorize Frans Koppers Imports Ltd. to charge the above listed credit card for goods received. And consent to keeping credit card on file for future payments.

Signature: _____ Name (please print): _____

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